

CLAIMS ONLY							Application Number 09/919,360	Filing Date
							Applicant(s)	
							* May be used for additional claims or amendments	
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/						51	/
2		/					52	/
3		/					53	/
4		/					54	/
5							55	/
6		/					56	/
7							57	/
8		/					58	/
9		/					59	/
10		/					60	/
11							61	/
12		/					62	/
13		/					63	/
14		/					64	/
15		/					65	/
16		/					66	/
17							67	/
18							68	/
19							69	/
20							70	/
21							71	/
22							72	/
23							73	/
24							74	/
25							75	/
26							76	/
27							77	/
28							78	/
29							79	/
30	/						80	/
31		/					81	/
32		/					82	/
33							83	
34		/					84	
35							85	
36		/					86	
37		/					87	
38		/					88	
39		/					89	
40		/					90	
41		/					91	
42		/					92	
43		/					93	
44		/					94	
45		/					95	
46		/					96	
47		/					97	
48		/					98	
49		/					99	
50		/					100	
Total Indep							Total Indep	3
Total Depend							Total Depend	14
Total Claims							Total Claims	65

(05/17/05)